



ITW

MAIL STOP ISSUE FEE  
PATENT  
0589-1013

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of

Magali BOU et al.

Conf. 1216

Application No. 10/560,086

Group 1761

Filed: December 9, 2005

Examiner

TITLE: ALCOHOL-TOLERANT MALOLACTIC STRAINS  
FOR THE MATURATION OF WINES WITH  
AVERAGE OR HIGH PH

**LETTER SUBMITTING  
SUPPLEMENTAL APPLICATION DATA SHEET**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

September 22, 2006

Sir:

We enclose herewith the substitute Application Data Sheet (ADS), changing the attorney docket number from "0521-1029" to 0589-1013.

Respectfully submitted,

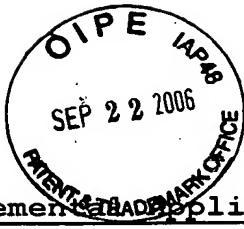
YOUNG & THOMPSON

By

*Benoit Castel*

Benoit Castel, #35,041  
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Arlington, Virginia 22202  
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BC:jlw



Supplemental Application Data Sheet

**Application Information**

Application Type:: National Stage  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: ALCOHOL-TOLERANT MALOLACTIC  
STRAINS FOR THE MATURATION OF  
WINES WITH AVERAGE OR HIGH PH  
Attorney Docket Number:: ~~0521-1029~~ 0589-1013  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?:

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: MAGALI  
Middle Name::  
Family Name:: BOU  
Name Suffix::  
City of Residence:: SEYSSES  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 855, CHEMIN DU MASSONNÉ  
Address::  
City of Mailing Address:: SEYSSES  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-31600

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: SIBYLLE  
Middle Name::  
Family Name:: KRIEGER  
Name Suffix::  
City of Residence:: STUTTGART  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing FÖHRICHSTRASSE 100  
Address::  
City of Mailing Address:: STUTTGART

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 70469

### Correspondence Information

Correspondence Customer 00466

Number::

### Representative Information

Representative Customer	00466
Number::	

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/001421	6/9/04

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03/07046	6/12/03	Yes

### Assignment Information

Assignee Name:: LALLEMAND SAS

Street of Mailing 19, RUE DES BRIQUETIERS

Address::

City of Mailing Address:: BLAGNAC

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-31700